

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L08000063546

**FILED**  
**Dec 14, 2009**  
**Secretary of State****Entity Name:** MY OWN SIN, LLC**Current Principal Place of Business:**5564 RAINEY AVENUE SOUTH  
ORANGE PARK, FL 32065**New Principal Place of Business:**230 MILL LANE  
202  
ST AUGUSTINE, FL 32084**Current Mailing Address:**5564 RAINEY AVENUE SOUTH  
ORANGE PARK, FL 32065**New Mailing Address:**230 MILL LANE  
202  
ST AUGUSTINE, FL 32084**FEI Number:** 30-0494307**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**ROSS, DANIELLE R  
5564 RAINEY AVENUE SOUTH  
ORANGE PARK, FL 32065 US**Name and Address of New Registered Agent:**ROSS, DANIELLE R  
230 MILL LANE  
202  
ST AUGUSTINE, FL 32084 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DANIELLE ROSS

12/14/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**Title: MGR ( ) Delete  
Name: ROSS, DANIELLE R  
Address: 5564 RAINEY AVENUE SOUTH  
City-St-Zip: ORANGE PARK, FL 32065Title: MGR (X) Delete  
Name: ROSS, PHILLIP J  
Address: 5564 RAINEY AVENUE SOUTH  
City-St-Zip: ORANGE PARK, FL 32065Title: MGR (X) Delete  
Name: BAKER, ELIZABETH S  
Address: 1043 EAST BURNS ROAD  
City-St-Zip: MIDDLEBURG, FL 32068Title: MGR (X) Delete  
Name: KEMPLIN, MICHAEL J  
Address: 1886 MACKENZIE COURT SOUTH  
City-St-Zip: MIDDLEBURG, FL 32068Title: MGR (X) Delete  
Name: PALMER, NATHAN R  
Address: 1148 TUMBLEWEED DRIVE  
City-St-Zip: ORANGE PARK, FL 32065**ADDITIONS/CHANGES:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DANIELLE ROSS

MGR

12/14/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date